



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM
FINANCIAL ASSISTANCE CENTER
DRINKING WATER STATE REVOLVING FUND

RESOLUTION OF GOVERNING BODY OF APPLICANT RESOLUTION NO.

(Suggested Form for Loan Applicant use)

Resolution authorizing the filing of an application with the Missouri Department of Natural Resources, State Revolving Fund Program for loans under the Missouri Safe Drinking Water Law (Section 640, RSMo).

WHEREAS under the terms of the Missouri Safe Drinking Water Law, Section 640, Revised Statutes of Missouri, the State of Missouri has authorized the making of loans and/or grants to authorized applicants to aid in the construction of specific public projects.

NOW, THEREFORE, be it resolved by _____
(governing body of applicant)

1. That _____ be and he/she is hereby authorized to execute and
(designated official)
file an application on behalf of _____
(legal name of applicant)
with the State of Missouri for a loan and/or grant to aid in the construction of:

(brief project description)

2. That _____,
(name of authorized official) (title)

be and he/she is hereby authorized and directed to furnish such information as the Missouri Department of Natural Resources may reasonably request in connection with the application which is herein authorized, to sign all necessary documents on behalf of the applicant, to furnish such assurances to the Missouri Department of Natural Resources as may be required by law or regulation, and to receive payment on behalf of the applicant.

CERTIFICATE OF RECORDING OFFICER

The undersigned, duly qualified and acting _____ of the
(title of officer)

_____, does hereby certify: That the attached resolution is a
(legal name of applicant)

true and correct copy of the resolution adopted at a legally convened meeting of the _____
held on the _____ day of _____, _____;
(name of the governing body of applicant)

and further that such resolution has been fully recorded in the journal of proceedings and records in my office. IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____, _____.

(signature of recording officer)

(title of recording officer)

SEAL (If applicant has an
official seal, impress here.)